# **USTA Junior Team Tennis**



REQUIRED: Parent's name\_\_\_\_\_

Phone (B)\_

# **League program**



## **SUMMER SEASON**

Cobb County Parks, Recreation and Cultural Affairs Department offers junior USTA leagues at each of Cobb's tennis centers. This program is for youth tennis players of all age and ability levels. Players may register individually and teams will be formed by the tennis center staff. This program provides instruction, match play and fun!!!

### Teams compete in a Cobb County division of USTA Team Tennis.

All players must be members of the USTA. To register, a USTA number and an accurate expiration date is required. If you need to purchase membership or inquire about your current membership status, phone the USTA office at 1-800-990-8782. The junior USTA membership fee is \$18.

**REGISTRATION:** Now – April 25 \$18.00 Payable to Cobb County Parks, Recreation & Cultural Affairs Dept. covers court fees for home matches including play-offs and administrative fees. \$36 for non-Cobb residents. \$85.00 Payable to Jim Hunter - lessons/coaching fees for 8 team lessons and administrative fees. (Refunds will be given if your child is not placed on a team.) (\$25.00 for league fee for USTA Team Tennis; \$60.00 for coaching/lessons.) Participating in coaching is part of this program. All players are required to pay the coaching fee and participate as much as possible. **TEAM PRACTICES:** Begin week of May 3 **SEASON BEGINS:** May 28 **PLEASE NOTE:** No refunds after April 25 Lost Mountain Tennis Center, 4845 Dallas Hwy, Powder Springs, GA 30127. Phone #: (770) 528-8525. \_\_\_\_\_ LOST MOUNTAIN TENNIS CENTER SUMMER 2010 JR USTA TEAM TENNIS REGISTRATION FORM \_\_\_\_\_\_ M F Age:\_\_\_\_\_ Birth date:\_\_\_\_\_ Name: 
 Street:
 \_\_\_\_\_\_\_State:
 \_\_\_\_\_\_\_\_Zip:
School attending next school year Grade Are you state-ranked? Playing experience: Will you move up in age group if necessary?:\_\_\_\_\_\_ Is there an inconvenient practice time?:\_\_\_\_\_ MUST BE COMPLETED BEFORE BEING ACCEPTED (If not completed, child will not be placed on a team.) Have you played ALTA before? No Yes Have you played USA Team Tennis before? No Yes Level of last team: 1.0 1.5 2.0 2.5 3.0 3.5 4.0 Age group of team\_\_\_\_\_ Level\_\_\_\_ Flight\_\_\_\_ USTA #\_\_\_\_

E-mail address

FOR OFFICE USE ONLY: Court fee paid: Receipt #: Date paid: Check # for coaching & league fee (\$85):\_\_\_\_\_\_ Initials\_\_\_\_\_

Are you willing to be a team manager? Yes No Will you help in other ways? Car pooling Phoning Other\_\_\_\_\_

Cell phone:

Barcode: 29143

#### **GENERAL INFORMATION**

- 1. Teams will be formed by ages and ability levels by Lost Mountain Tennis Center, (770) 528-8525.
- 2. Team's home matches will be played at Lost Mountain Tennis Center. Oregon Park will be used if necessary. Practices will be at Lost Mountain Tennis Center.
- 3. Practices will be held after school one day a week (Monday Friday). All coaching sessions will be given. Practices start 3 weeks before the season that lasts 7 weeks, so this should give coaches and teams ample time to complete the sessions. If not, any additional sessions will be given immediately after the season. **Refunds will not be given.**
- 4. Parents are needed as volunteers for team managers, car-pooling, phone calling, etc. Please let us know if you can volunteer. (NOTE: Teams cannot be formed without team managers.)
- 5. During the week of April 26, the team manager will notify players as to what team they are on and practice times. Rosters are kept by the coaches and team managers.
- 6. Teams (age groups) will be 10 & under, 12 & under, 14 & under, & 18 & under. Teams consist of one girls' singles, one boys' singles, one girls' doubles, one boys' doubles, and one mixed doubles.
- 7. Matches will be on Fridays, starting May 28 at 10am.
- 8. Individual requests concerning location, specific team, coach, or practice days and times will be considered, but we may be unable to accommodate your request due to lack of space, etc. If there is an inconvenient practice time, please state on form.
- 9. Every effort will be made to place your child on a team. If, due to age and ability level, a team is not available, we will contact parent prior to roster deadline.
- 10. Players wanting to be on the same team must turn in their application forms stapled together. Players must be in the same age group and level.
- 11. During the regular season, players will play as equal a number of matches as possible, but during the play-offs, the coach has the option to field the strongest team.

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See our website at http://prca.cobbcountyga.gov/tennis.htm			

12. Minimum age requirement: a player must be turning at least 8 years old in 2010.

In order that the department assures compliance with ADA (Americans with Disabilities Act), please make the staff who work with the program/facilities aware of any specific physical or service accessibility need, so that we can reasonably accommodate your request.

#### RELEASE AND HOLD HARMLESS AGREEMENT - PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the Cobb County Parks, Recreation and Cultural Affairs Department, I am, to the best of my knowledge, in good health and able to participate in the program. I authorize the staff of the Cobb County Parks, Recreation and Cultural Affairs Department to organize any required medical or first aid procedure, or to take the undersigned to a hospital emergency room for treatment. If any major treatment is required, I understand that every effort will be made to notify the individual indicated as emergency contact beforehand by telephone.

The undersigned hereby forever releases, discharges, and covenants to hold harmless the Cobb County Parks, Recreation and Cultural Affairs Department, the Cobb County Recreation Board, the Cobb Arts Board, the Cobb County Board of Commissioners and Cobb County, Georgia and any other person, firm, corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors and assignees from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or arising out of any act or occurrence in connection with and particularly on account of all personal injury disability, property damage, loss or damages of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreation program sponsored by the Cobb County Parks, Recreation and Cultural Affairs Department. The undersigned hereby bind their heirs, administrators, executors and successors. Further, this agreement shall apply to all unknown and unanticipated injuries and damages directly or indirectly resulting here-from. This Release and Hold Harmless Agreement shall constitute a full and complete release of any and all claims.

DATE:	BY:		Signature of Participant	
DATE:	BY:		[Signature of Parent or Guardian]	
NOTE: Signature of participant and parent/guardian are both required if participant is under age 19, or is registered for a program for the mentally or physically challenged, or other special population member.				
My signature on this entry form grants permission for my son or daughter to participate in the Harrison Junior USTA Program. I further acknowledge that I have read, and fully understand the rules and guidelines set forth in this brochure, and that all fees will be paid to the tennis center and teaching pros.				
Signature of parent or guardian		Date		